



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 2358

<b>SERIAL NUMBER</b> 10/821,959	<b>FILING OR 371(c) DATE</b> 04/12/2004 <b>RULE</b>	<b>CLASS</b> 029	<b>GROUP ART UNIT</b> 3729	<b>ATTORNEY DOCKET NO.</b> 861840 999025
------------------------------------	---	---------------------	-------------------------------	---

**APPLICANTS**

Bernhard Geuppert, Aalen, GERMANY;  
 Jens Kugler, Heubach, GERMANY;  
 Thomas Ittner, Aalen, GERMANY;  
 Bernd Geh, Scottsdale, AZ;  
 Rolf Freimann, Aalen, GERMANY;  
 Guenther Seitz, Spiegelberg, GERMANY;  
 Bernhard Fellner, Aalen, GERMANY;  
 Bernd Doerband, Aalen, GERMANY;  
 Stefan Schulte, Aalen-Waldhausen, GERMANY;

\*\* CONTINUING DATA \*\*\*\*\*

None PK

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None PK

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/21/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	<b>STATE OR COUNTRY</b> GERMANY	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 25	<b>INDEPENDENT CLAIMS</b> 9
--	---	------------------------------------	----------------------------	---------------------------	--------------------------------

**ADDRESS**

51442

**TITLE**

Method of manufacturing an optical component and optical system using the same

<b>FILING FEE RECEIVED</b> 1506	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	---	---